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CONFIRMATION NO. 5077

<b>SERIAL NUMBER</b> 10/572,559	<b>FILING OR 371(c) DATE</b> 03/17/2006 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1655	<b>ATTORNEY DOCKET NO.</b> SHA 137NP
<b>APPLICANTS</b> Huan Huang, Shanghai, CHINA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/CN04/01070 09/20/2004				
<b>** FOREIGN APPLICATIONS *****</b> CHINA 03150998.3 09/19/2003 CHINA 03150997.5 09/19/2003				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 10/30/2006				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CHINA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 5 <b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 23995				
<b>TITLE</b> EPIMERDINOSIDE A ORAL PHARMACEUTICS CONTAINING THE SAME AND PREPARATORY AND DETERMINATION METHODS				
<b>FILING FEE RECEIVED</b> 960	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	